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PTO/SB/01 (12-97)  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	AL01019
	<b>First Named Inventor</b>	SHIH, et al
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	/
	<b>Filing Date</b>	September 18, 2001
	<b>Group Art Unit</b>	To Be Assigned
	<b>Examiner Name</b>	To Be Assigned

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTITUTED IMIDAZOLES AS DUAL HISTAMINE H1 AND H3 AGONISTS OR ANTAGONISTS

the specification of which *(Title of the Invention)*

☒ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/234,039	9/20/00	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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<b>CERTIFICATE OF MAILING</b>			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:			
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<b>Express Mail Label No.</b>	EL403237497US
<b>Date</b>	Sept. 18, 2001

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

AL01019

SHIH, et al

**COMPLETE IF KNOWN**

/

September 18, 2001

### To Be Assigned

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OR

☒ was filed on (MM/DD/YYYY) 9/20/2000 as United States Application Number or PCT International

Application Number 60/234,039 and was amended on (MM/DD/YYYY)                      (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

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				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Application(s) listed below:
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Customer Number 24265

OR

☐ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number 24265 OR ☐ Correspondence address below

Name	PALAIYUR S. KALYANARAMAN					Reg. No.	34,634		
Address									
Address									
City					State			ZIP	
Country			Telephone	(908) 298- 5068			Fax	(908) 298-5388	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**Name of Sole or First Inventor:**

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
NENG-YANG	SHIH

Inventor's Signature					Date		
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Post Office Address							
City	NORTH CALDWELL	State	NEW JERSEY	ZIP	07006	Country	U.S.A.

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 1 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
ROBERT G.		ASLANIAN	
<b>Inventor's Signature</b>		<b>Date</b>	
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<b>Mailing Address</b> 144 PHILIP DRIVE			
<b>Mailing Address</b>			
<b>City</b> ROCKAWAY	<b>State</b> NJ	<b>ZIP</b> 07866	<b>Country</b> U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
DANIEL M.		SOLOMON	
<b>Inventor's Signature</b>		<b>Date</b>	
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<b>Mailing Address</b>			
<b>City</b> EDISON	<b>State</b> NJ	<b>ZIP</b> 08817	<b>Country</b> U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
STUART B.		ROSENBLUM	
<b>Inventor's Signature</b>		<b>Date</b>	
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<b>Mailing Address</b> 16 STEVEN TERRACE			
<b>Mailing Address</b>			
<b>City</b> WEST ORANGE	<b>State</b> NJ	<b>ZIP</b> 07052	<b>Country</b> U.S.A.

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 2 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
MWANGI Wa		MUTAH	
Inventor's Signature		Date	
Residence: City FORDS	State NJ	Country U.S.A.	Citizenship KENYA
Mailing Address 45 SNYDER ROAD			
Mailing Address			
City FORDS	State NJ	ZIP 08863	Country U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
TOM C.		WING	
Inventor's Signature		Date	
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Mailing Address 133 CEDAR GROVE PARKWAY			
Mailing Address			
City CEDAR GROVE	State NJ	ZIP 07009	Country U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
KEVIN D.		MC CORMICK	
Inventor's Signature		Date	
Residence: City EDISON	State NJ	Country I/S/A/	Citizenship U.S.A.
Mailing Address 5 PACE DRIVE			
Mailing Address			
City EDISON	State	ZIP	Country

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Page 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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JOHN J.		PIWINSKI	
<b>Inventor's Signature</b>		<b>Date</b>	
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<b>Mailing Address</b> 6 SADDLE RIDGE DRIVE			
<b>Mailing Address</b>			
<b>City</b> LEBANON	<b>State</b> NJ	<b>ZIP</b> 08833	<b>Country</b> U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
RONALD		WOLIN	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> SAN DIEGO	<b>State</b> CA	<b>Country</b> U.S.A.	<b>Citizenship</b> U.S.A.
<b>Mailing Address</b> 16309 LOS ROSALES			
<b>Mailing Address</b>			
<b>City</b> SAN DIEGO	<b>State</b> CA	<b>ZIP</b> 92127	<b>Country</b> U.S.A.
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b>	<b>State</b>	<b>Country</b>	<b>Citizenship</b>
<b>Mailing Address</b>			
<b>Mailing Address</b>			
<b>City</b>	<b>State</b>	<b>ZIP</b>	<b>Country</b>

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